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ABSTRACT

Following a description of the pattern of burnout symptoms, which include attitudinal, emotional, and physical components, measures are discussed for determining individuals' reactions to stress and their tendencies to "burnout." A discussion on strategies to cure or prevent burnout includes consideration of three basic methods: cognitive restructuring; time management; and various forms of relaxation training, such as visualization, quieting reflexes, autogenics, and biofeedback. It is suggested that an inservice program for teachers on the identification and control of burnout should be considered an imperative by school administrators. (JD)

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Burnout Prevention Programs:
A Must for Staff Development

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Burnout Prevention Programs: A Must for Staff Development

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Inservice education began as a continuing program to improve the professional qualifications of teachers. As education in the 1960's turned to humanistic and holistic approaches, inservice education helped teachers learn to teach unconventional subjects and view students in a new light. In the 1970's, as education saw a return to basics and a move to criterion-referenced testing, inservice education sought to keep teachers current in both their subject areas and the changing aspect of testing. This adaptability to current trends has kept inservice education vibrant and workable. The challenge for the 1980's, however, is not to accommodate a new subject area or teaching method to professional training of teachers, but to broaden inservice education to encourage not only professional growth but personal growth.

New teaching tools and methods may be beneficial, but education cannot change without changing the staff. Harris (1980) noted that the total dependency of education on people requires inservice education to help the staff grow. Further, if teachers are dedicated, insightful, inspired workers, education can work even with the poorest organization and supplies (Rubin, 1978). Inservice education must recognize the people-oriented nature of education and provide personal growth programs as well

as those for professional growth. Furey (1978), while recognizing the need for both personal and professional growth, contends that personal growth must come first since it will teach individuals to be adaptable. Only self-aware people willing to change can continue to grow, whether personally or professionally.

The term burnout is recognized instantly in the 1980's and everyone can point to colleagues who suffer from burnout. Yet the concept is poorly understood and little effort is made to prevent its occurrence or reverse its symptoms. Burnout destroys people, the very resource most vital to education, yet educators rarely address it as a problem for the staff as a whole; it is seen as an individual problem, not a group concern. Further, educators are at particular risk. Burnout affects workers in the helping professions in alarming numbers, perhaps due to the stress involved in the interpersonal relationships essential to such work (Maslach, 1982). Education, a people-oriented profession, is a perfect medium for burnout to flourish unless preventive and corrective steps are taken.

Inservice education is intended to help teachers grow, to improve teaching, and to give direction to education. Surely burnout, so costly in terms of staff and productivity, should be a concern of those designing inservice programs. Burnout prevents growth, hinders change, and lacks direction; it is the antithesis of the goals of inservice education. A thorough inservice program planned to promote both professional and personal growth, should incorporate information on what burnout is, how to avoid it, and strategies for coping with its effects.

An Introduction to Stress and the General Adaptation Syndrome

As a consequence of the work of the physiologist, Dr. Hans Selye (1950), biological, social, and behavioral scientists are increasing their understanding of stress. Perhaps Selye's most significant contribution to an understanding of stress is his concept of the "general adaptation syndrome," a notion that helps one comprehend the effects of stress on the body. The general adaptation syndrome divides stress into three stages: (1) the alarm reaction, (2) the resistance stage, and (3) exhaustion.

The alarm reaction entails bodily changes associated with emotions. The bodily changes are initiated by the sympathetic division of the autonomic nervous system. The sympathetic division increases the heart rate and blood pressure, and distributes blood more copiously to the exterior musculature.

In contrast to the sympathetic division of the autonomic nervous system, the parasympathetic division attends the day-to-day functioning of organs. When one manifests emotion, the sympathetic division overrules the parasympathetic division, producing a number of symptoms. Under conditions of fear, blood circulation is altered; the blood supply to the viscera is restricted while the supply to the exterior muscles of the trunk and limbs increases. Thus, the process of digestion is curtailed in favor of increasing the potential for movement, either in defense or retreat. Concurrently, nervous impulses to the heart cause it to beat faster and harder; blood pressure increases and pulse rate accelerates. In addition to such alterations to normal circulation, the pupils of the eyes dilate and the mouth

becomes dry. Harvard physiologist, Walter B. Cannon (Everly & Girdano, 1980), viewed such adaptation as the preparation by the body to act or to respond to stress. The response actually selected, in the model by Cannon, exists somewhere along a continuum whose poles are defense against the threat and flight from the threat. Cannon called the continuum of possible responses the "flight or flight" response.

According to Selye (1950), when the sympathetic division becomes ascendant over the parasympathetic division, the adrenal glands hypersecrete epinephrine (or adrenalin) and norepinephrine. These hormones are secreted directly into the blood stream. Epinephrine releases more blood sugar, thus making more energy available to the brain and muscles. It also stimulates the heart to beat faster. Thus, epinephrine augments and compliments the action of the sympathetic division. Norepinephrine constricts peripheral blood vessels, thus raising blood pressure.

If stress continues for some time, one enters the resistance stage. In this stage one recovers from the initial outburst of emotion and attempts to endure the emotion-producing situation as well as possible. The attempt by the individual to endure emotion places relatively high degrees of strain on bodily and psychological resources.

If the stress is overwhelming and the individual is unable to cope with or manage the stress, he or she enters the third stage, exhaustion. In this stage, all internal resources for managing stress are exhausted, even though the original sources

of stress, called stressors, and any new stressors which may have arisen during the resistance phase continue to distress the individual.

Within the context of the general adaptation syndrome, it is possible to develop an understanding of the term "burnout." In the opinion of the authors, burnout is a phenomenon that occurs during the "twilight zone" between the resistance stage and the initial period of exhaustion. The alarm reaction may be viewed as an attempt by the body to protect itself from a stressor or stressors. The mobilization of physical and psychological resources of an organism needed to manage current and new stress during the resistance stage exacts a considerable quid pro quo. As the individual attempts to manage unresolved "old" stress and cope with new stress, the constant depletion of physical and psychological resources, results in burnout.

Other Definitions of Burnout

Although there are many different scientific and popular definitions and formulations of burnout, almost all incorporate the notion that burnout is a response to stress encountered on the job. Persons in occupations which are people-oriented tend to be more susceptible to the syndrome than others.

Potter (1980) thinks that burnout is neither a physical ailment nor a neurosis, although the condition has both physical and psychological attributes. According to Potter, a person suffering from burnout loses the will and ability to mobilize interests and capabilities. Freudenberger and Richelson (1980) describe a person with the syndrome as one who has depleted the

physical and mental resources of the body while striving to reach some unrealistic expectation. Another source (Pines, Aronson, and Kafry, 1981) gives three components of burnout: physical exhaustion characterized by low energy, chronic fatigue, weakness, and weariness; emotional exhaustion involving feelings of depression, helplessness, hopelessness, and entrapment; and mental exhaustion depicted by the development of negative attitudes toward self, work, and life. To the list of descriptors suggested by others, Maslach (1982) adds depersonalization and reduced personal accomplishments.

Some theorists (Farber, 1983; Edelwich and Brodsky, 1980; Tubesing, Sippel, and Tubesing, 1981) view burnout as a slow, eroding process. Seldom does it begin with major symptoms. Normally, the initial signals are minor ones which, if not attended to, grow into symptoms of major proportion that can no longer be ignored. Once people start down the pathway of disillusionment, once they have tasted the staleness of continuing frustration, burnout tends to perpetuate itself through its own momentum, leading individuals on to cynical attitudes, emotional exhaustion, apathy, and loss of vitality and spiritual zest. Thus, burnout can be conceptualized as a function of the stresses engendered by individual, work-related, and societal factors. The final stage in a progression of unsuccessful attempts to cope with a variety of negative stress conditions is burnout. According to Edelwich and Brodsky, the progression goes from enthusiasm to stagnation to frustration and finally to apathy, as a result of conditions of work. In order

to alleviate and possibly eliminate burnout, there must be direct intervention aimed at interrupting the self-perpetuating cycle.

Ianni and Reuss-Ianni (1983) describe burnout as a distinct entity which is characterized by several key features. First, it is a malady with specific contemporary roots in Western society. This notion does not preclude the possibility that it has always existed and has only recently been recognized and labeled, but rather suggests that it seems related somehow to modern living. Second, it is peculiarly related to the workplace. When it is discovered and recognized, its first symptoms are almost always negative responses to the job and work dissatisfaction. Burnout seems to occur in those situations where the stresses of the job or work role become internalized, leading either to somatization of symptoms or loss of self-esteem, or both.

There is consensus that the symptoms of burnout include attitudinal, emotional, and physical components. The subtle pattern of symptoms, behaviors, and attitudes is unique because people react to stressors individualistically. However, burnout appears to result in reduced efficiency, psychosomatic diseases, loss of energy, loss of interest, loss of confidence, cynicism, rigid adherence to rules, extreme detachment from persons, and sometimes a singular incident of unusual (for that individual) conduct. Burnout occurs on a continuum. A person may pass through several warning stages before reaching the final stage of burnout. Because of the progressive nature of the syndrome, individuals, companies, and institutions would benefit from early recognition. Early recognition enables the employer and employee to make changes to prevent development into the final stages.

Measures of Burnout

The first step in identifying and coping with burnout is to determine who has burnout (or is approaching burnout). Two instruments, the Maslach Burnout Inventory and the Matthews Burnout Scales, place individuals along the burnout continuum. Both are valid and reliable instruments, but they have somewhat different purposes and interpretations.

Maslach and Jackson (1981) developed the Maslach Burnout Inventory (MBI) for use with people employed in human services. The inventory is a 22 item measure with three subscales: emotional exhaustion, depersonalization, and personal accomplishment. For each statement, the respondent answers "how often" and "how strong" on seven and eight point Likert scales, respectively. This process results in two scores indicating frequency and intensity for each of the subscales.

Matthews (1984) developed the Matthews Burnout Scales, (MBS) actually two instruments, for use in a wide range of workplaces. The two 50-item instruments are designed to measure burnout in employees; one instrument is for completion by the employee and the other for completion by a supervisor. The scales place individuals along a 100-point scale where high scores indicate burnout.

Both the MBI and the MBS are useful measures of burnout, differing mainly in the information they produce and their appropriate target populations. The MBI presents more information in its results in terms of subscales and the two modes of reporting, frequency and intensity. The MBS, on the

other hand, is appropriate for use with a wider audience and has the only scale which supervisors may use to determine employee burnout.

Methods for Burnout Prevention and Intervention

Although organizational change may assist in alleviating or preventing burnout, the person is powerless, in most cases, to radically change the structure of an institution or school. Since burnout afflicts people, the ultimate responsibility for preventing the syndrome lies within the person. The authors recommend strategies for inservice education that are designed to improve the functioning of the individual.

Burnout is a whole person problem. Solutions to the problem can be found in every dimension of life. Diet, exercise, and rest affect the way a person feels. The social support network is important also. Although there are many strategies to cure or prevent burnout, the discussion which follows presents three basic methods: cognitive restructuring; time management; and various forms of relaxation training such as visualization, quieting reflex, autogenics, and biofeedback. Cognitive restructuring is a method to change the mind of the person in order to have a healthy attitude and to view the situation from a totally different perspective. Time management encourages the art of spending time effectively by eradicating time-wasters in the day. Relaxation training shows the mind/body connection and teaches a person to elicit the relaxation response at will. Cognitive restructuring, time management, and relaxation training

coupled with proper nutrition, rest, exercise, and a good support system are ingredients for a fulfilling and productive life.

Cognitive Restructuring

Cognitive restructuring involves (1) examining the interactions between events and beliefs which lead to perceptions and emotional reactions, (2) recognizing when the reactions are unwarranted or negative, and (3) altering the way one thinks about the situation in order to alter the emotional reaction.

At the core of this approach is the Ellisonian A-B-C-D-E Model presented in Howard 3. Young's A Rational Counseling Primer. A refers to activating events or experiences; B refers to beliefs, ideas, or thoughts about A; C is the consequence (emotional reaction) that stems not from A but from B about A; D refers to the necessity to dispute, debate, question, or challenge irrational beliefs (B); and E refers to the effects of disputing or debating or questioning or challenging irrational beliefs.

McKay, Davis, and Fanning (1981) summarized 15 styles of distorted thinking. Briefly, the 15 styles are:

1. Filtering: Magnifying negative details and filtering out positive aspects.
2. Polarized Thinking: Viewing all situations as black or white, good or bad.
3. Overgeneralization: Making general conclusions based on small details or incidents.
4. Mind Reading: Attributing thoughts and feelings to other people without evidence.
5. Catastrophizing: Imagining the most disastrous results any situation might cause.
6. Personalization: Considering the actions of others to be

always in response to you.

7. Control Fallacies: Considering yourself either wholly responsible or a victim of fate.
8. Fallacy of Fairness: Considering your opinion as fair and failing to understand those who disagree with you.
9. Blaming: Feeling you must place the blame for any event, either on yourself or others.
10. Shoulds: Having a list of rules of how you and others should act.
11. Emotional Reasoning: Believing all feelings are true.
12. Fallacy of Change: Believing that you can change others to suit you if you try hard enough.
13. Global Labeling: Generalizing one or two qualities to form an overall opinion or judgement.
14. Being Right: Viewing all differences of opinion as challenges and your own opinion as necessarily correct.
15. Heaven's Reward Fallacy: Expecting some eventual reward for all your efforts and being disappointed when the reward fails to materialize.

Each distortion is characterized by a faulty way of thinking which results in negative emotional interpretations of events. In order to restructure these styles of thinking, one must: (1) realize that there are negative emotional reactions which are unwarranted; (2) examine his or her thought patterns to see how they may be distorted; and (3) see new ways of thinking about the circumstances which will lead to positive emotions.

Time Management

Because there are so many things to do every day, time is a precious commodity. Teachers and administrators have demanding schedules, a condition which makes time a stressor to control.

Time can be thought of as an endless series of decisions, small and large that gradually change the shape of life. Since

no one has more than 24 hours a day, one must pay attention to how well he or she regulates the flow of activity in the personal environment. According to Davis, McKay, and Eshelman (1980), inappropriate decisions not only produce frustrations, lowered self esteem, and stress, but result in symptoms of poor time management. The symptoms of poor time management can be summarized as (1) rushing, (2) chronic vacillation between unpleasant alternatives, (3) fatigue or listlessness with many slack hours of non-productive activity, (4) constantly missed deadlines, (5) insufficient time for rest or personal relationships, and (6) the sense of being overwhelmed by demands and details. Lack of time management eventually produces burnout.

Time management is a five-step process (George, 1983). The five steps include time analysis, goal setting, prioritization, delegation, and action.

Time analysis involves exploring how one spends time in the present. For approximately two weeks one should record what one does every one-half hour. At the end of the period, the person analyzes and categorizes the inventory to see how time is actually spent. Categories at work might include socializing, routine tasks, low priority work, productive work, meetings, conferences, and telephone calls. Categories away from the work site may include television, conversation, hobbies, reading, sports, civic activities, travel, shopping, household chores, childcare, personal hygiene and grooming, sexual activities, daydreaming, cooking, eating, and sleeping.

The second step in time management is goal setting. The inventory of activities allows self-evaluation and helps with goal setting. With a time period in mind, perhaps one year, the person makes both long and short range goals. A good way to approach goal setting is to allow the brain to think of all the things one would like to accomplish and record the accomplishments on paper. Through brainstorming, an individual has a list now of possible goals. For goals to be appropriate, they should meet the criteria of being both measurable and realistic.

Since time is limited and meeting all goals is unrealistic, the logical next step is prioritization. In order to prioritize, one should rank the goals in three columns: essential (must do); desire but not essential (should do); and good but can be delayed (can do). The first set of goals becomes the set that a person strives to achieve. The second and third list of goals lay dormant unless the first list is completed.

One way of making more personal time is to delegate responsibility, thus making delegating the fourth step in the time management model. Teachers and administrators have other individuals such as students, aides, secretaries, and volunteers to assist with the work of the program. The same technique works at home with household chores because all family members share in the operation of the home. For people in supervision, a good rule to follow is "to avoid doing things that someone else can do."

The fifth and final step in time management is action. Action means planning strategy to accomplish the goals and

performing the tasks outlined in the strategy. Since most people work better with small segments, the strategy should be broken down into small achievable steps. A person must find some time each day to work on the goals that are important. Even rewarding oneself after small segments of achievement helps one stick to the targeted goal. The goal of time management is effective utilization of time for personal benefit.

Suggested ways (Davis, McKay, & Eshelman, 1980) to increase the time one has for productive activity are such things as (1) saying "no" to people and things that do not fit goal priorities, (2) minimizing interruptions and distractions while working, (3) estimating reasonable time for activities and leaving some time for unplanned activities which occur, (4) watching little television, (5) getting up one-half hour earlier in the morning, (6) using wait time wisely such as reading or planning a lesson, and (7) cutting off non-productive activities. These suggestions are only a few from a long list that may prove helpful to personnel in teaching and related fields.

Relaxation Training

Various techniques in relaxation training are designed to enable the individual to elicit the relaxation response. The relaxation response is the opposite of the alarm state in the general adaptation syndrome. The relaxation response is characterized by decreased heart rate, decreased muscle tension, lowered respiration rate, decreased metabolism, increased digestion, changes in the blood chemistry, and vasoconstriction causing blood flow away from the periphery of the body and toward

the trunk. When stress causes an alarm reaction, eliciting the relaxation response can counter the physical changes of alarm and maintain a calm, relaxed state.

Following are brief descriptions of some relaxation techniques known to be successful at helping some people elicit the relaxation response:

Progressive relaxation. This technique is based on muscle tension. The individual focuses on a single muscle, muscle group, or area of the body and alternately tenses and relaxes the muscles (Jacobson, 1976). This process continues by progressing from one area of the body to another, usually moving from the extremities to the trunk. As each area of the body is tensed and relaxed, the individual learns the feelings associated with muscle tension and releases any tensions currently in the body. By the end of the relaxation training session, the entire body should be relaxed.

While progressive relaxation directly reduces muscle tension, it has other effects less immediately evident. The flexing of muscles causes increased blood flow and thus increases the blood flow to the various parts of the body including the extremities.

Progressive relaxation is one of the simplest relaxation techniques, but is somewhat limited in variety. It is sometimes used as an introductory technique before moving on to other techniques.

Visualization. Visualization (Bry, 1978) is termed "movies of the mind" whereby a person is not analyzing or thinking about

an experience but actually feeling the experience directly. These "movies" are derived from the right-brain experience which is intuitive and creative, rather than from the left side of the brain which is logical and verbal. Bry describes the "movie" or inner experience as similar to the image of a "lovely golden child," beautiful, knowing, loving, and spontaneous.

There are many facets of visualization--it is a source of information about the inner self and a channel to both personal and universal truth. While it is in touch with the imaginary powers, it is also a method of developing control of the autonomic functions and inner awareness of the body.

The first important step in developing a visualization technique is to set the right mood, that is, place oneself in a positive state of mind. An undisturbed area where one can relax is essential for the inner eye (or "movie screen") to focus and allow the expectation of a wonderful experience to unfold.

The positive mind approach allows one to believe that he or she can govern all experiences. What one envisions in life is what one gets, the images becoming self-fulfilling prophecies.

According to Bry, two methods of visualization to use are receptiveness (starting with a certain theme) and programming (setting up a positive picture to create the pictured situation or what it may represent symbolically). In a receptive state one may let go and go with the flow of the "movie screen," letting the picture roll along on its own. In a programmed state one should introduce specific images, discovering first what is wanted by forming precise and clear pictures and holding onto that image. If this particular stage feels comfortable (ask does

it feel good and right?), then one can follow through and use the power of the mind to create personal reality through the "movie screen."

Once the theme of the "movie is set, the director (oneself) should become aware of the feelings the movie has evoked. Negative feelings should be allowed to form as well as excitement, peacefulness, or other emotions, concentrating on discovering why these feelings are evident. Opening the other senses while experiencing the movies will make the experience more complete and powerful.

The final step, and the most difficult, is to believe and trust in the visualization, giving the result a chance to manifest. Use both elements of visualization--active (concentration) and receptive (allow the idea to work).

In the private screening room of a person, the visualization technique can be used as a tool to improve many areas of life. For optimum good health and in overcoming certain diseases, illnesses, and pain, the power of the mind over body (acting as one inseparable system) can achieve excellent results. The movie should be located in a relaxing, beautiful place, and once comfortable, one should seek out a person or animal for a message regarding the illness or pain. After satisfactory communication, good feelings should be realized, both in mind and body.

In the opinion of Bry, the most beneficial act one can do for oneself is to learn and practice daily an exercise in visualization. Visualization unleashes the creative imagination and allows the replaying of childhood and past experiences. The

technique helps a person deal with problems of the present and future. Additionally, the technique helps develop good interpersonal skills.

Quieting reflex. As an alternative to taking drugs for stress-related problems, Charles Stroebe (1982) developed a six-second "quieting reflex" technique (QR) which proved highly successful for persons with demanding schedules. The new procedure solves the problem of low compliance and training associated with other self-regulation techniques (i.e., transcendental meditation, relaxation response, and biofeedback).

The "fight-or-flight" (or emergency) response is prevented from being activated by this simple six-second technique, and thus prevents or reverses illnesses as a result of activating the emergency response inappropriately. QR differs from emergency response in two distinct and highly significant ways: 1) while highly compatible with the high pressure society of today, it permits one to function with an alert mind while in a calm body; and 2) after the initial learning period, QR becomes automatic--the QR is activated at a subconscious level in lieu of the body undergoing the emergency response.

The cue for QR is an awareness of something frightening and annoying in the environment (tension, annoyance, anxiety, alteration in breathing) followed by the precise counterpart to the first six seconds of the emergency response--activation of quieting reflex. The following steps should then be followed:

- 1) Smile inwardly with both eyes and mouth; use a self-suggestion of "Alert amused mind, calm body."
- 2) Take an easy deep breath; then

3) While exhaling, let the jaw, tongue, and shoulders go limp; one should then feel a wave of heaviness and warmth flowing through the body from the head to the toes.

4) Then resume normal activity.

These steps performed at the very moment of stress will enable one to take control of the impact of stress on the health and help one avoid the dangers of stress-related illnesses for the remainder of life.

Autogenics. Autogenics (Everly & Girdano, 1980), a word meaning self-generating, is a high-level cognitive technique for triggering the physiological relaxation response. The technique combines other relaxation strategies such as imagery, deep breathing, and self-talk or self-messages. The technique of autogenics simply helps condition relaxation through recall of relaxed body states and memories of relaxed times in life. It is a technique where a person talks to the body and tells the body to relax. It helps if a person can vividly imagine a scene or feeling in which the body has achieved a quiet physical state.

One of the common techniques used in autogenic programs capitalizes on the ability of the body to follow the commands of the conscious centers of the brain. Typical phrases used during the exercises are: I am relaxed; I am calm; I am quiet; My right arm is heavy; My right arm is heavy and warm; My left arm is heavy and warm; and I am quiet and at peace. If one can imagine warmth, or a feeling level response of a heavy sensation in the limbs, the body has the tendency to reproduce that state. Blood

flow in response to the conscious demand will increase to the desired areas thereby creating the desired warmth. This change is physiologically impossible without a change in nervous system tone. Thus relaxation is facilitated.

Biofeedback. Biofeedback is the use of instrumentation for training individuals in the self-regulation of psychophysiology. Scientists have discovered that there is a significant amount of voluntary control over so-called involuntary responses (Brown, 1977). Biofeedback promotes self-exploration, self-awareness, and self-control.

The simple principle of biofeedback is that awareness of body functions is the first and most important ingredient in changing the behavior that causes the stress reaction (Girdano & Everly, 1979). If one learns to listen to the body, the body tells about its functioning. Biofeedback magnifies the subtle signals so the signs become more noticeable. The readings of the signals can be used to make a person aware of body language. Thermal measurements of skin temperature can indicate blood flow changes to a particular region of the body. Galvanic skin response monitors measure the amount of moisture on the skin. Measuring contraction of skeletal muscles can detect muscle action before it reaches the state of producing pain and discomfort. Monitoring brain waves can tell one much about states of consciousness and information processing which can aid in the voluntary control of consciousness. The possibilities of biofeedback are as numerous as the systems that can be measured.

Conclusions

Inservice education is maturing into the on-going series of meetings aimed at professional growth which its architects envisioned. But its mission is incomplete as long as it ignores or avoids the personal growth of teachers and other educators. The combination of personal and professional learning is essential for people to continue growing on the job.

Education, as with health care and similar fields, is heavily people-dependent. As such, it must respond to the needs of its employees as an essential first step. Stress, eventually resulting in burnout if not controlled, may be the single greatest threat to people-oriented industries. Burnout destroys drive, enthusiasm, growth, efficiency, and results in illness, absenteeism, and the loss of once valuable employees.

Fortunately, burnout can be identified and stress reduced before its symptoms are irreversible. A variety of techniques, including cognitive restructuring, time management, and the host of relaxation techniques accompanied by biofeedback, produce the opposite effects of the stress reaction. Practicing these techniques on a regular basis, especially when faced with stressful situations, can relieve stress before its long-term effects are realized.

The challenge for inservice education in the 1980's is to promote healthy growth both professionally and personally in individual employees and the whole staff. Incorporating stress management techniques in inservice programs can prevent burnout, promote personal growth, and allow professional growth. Burnout prevention is, indeed, a must for staff development.

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